

REMARKS

Claims 22-29 were rejected under 35 U.S.C. §103(a) as being unpatentable over commonly owned US Pat. 5,603,323 (Pflugrath et al.) Claim 22 has been amended to more clearly define the present invention. amended Claim 22 describes a method of providing a diagnostic imaging system in a health care facility, the method comprising installing a data network in the health care facility having a plurality of data ports distributed throughout a significant portion of the health care facility; obtaining a plurality of diagnostic signal acquisition units adapted to be coupled to selected ones of the data ports of the network and which are structured to provide diagnostic signals corresponding to diagnostic images acquired using the diagnostic signal acquisition units; coupling the diagnostic signal acquisition units to the data network as needed to obtain diagnostic signals using the diagnostic signal acquisition units; coupling a network data processor to the data network, the network data processor being structured to process the diagnostic signals provided by a plurality of the diagnostic signal acquisition units to produce image data; and obtaining a plurality of display units which are separable from the diagnostic signal acquisition units and are structured to display diagnostic images corresponding to the image data processed by the network data processor, the number of display units obtained corresponding to at least a number of acquisition units that are used simultaneously, wherein one of the plurality of the display units may be configured to display an image processed by the network data processor from the image data of a selected one of the plurality of diagnostic signal acquisition units. As the Examiner will appreciate from seeing Figs. 2 and 3 of the present application, it is not the intention of applicants to claim a network of fully integrated, stand-alone diagnostic imaging systems as shown in Fig. 2, which would be the result of connecting a plurality of the Pflugrath et al. imaging systems 100 to a hospital network as the Examiner suggests. Rather, it is the intention to claim a distributed system as shown in Fig. 3 in which the diagnostic signal acquisition units, the data processor which produces the diagnostic images, and the displays on which the images are shown are separate, and can be configured or coupled

together as needed to put an imaging system together wherever it is needed in the hospital.

For instance, when a clinician needs to conduct an imaging exam of a patient, the patient can be brought to the imaging lab in the hospital or a stand-alone imaging system 100 of Pflugrath et al. can be wheeled into the patient's room. The patient is then examined with the fully integrated system which processes the images and displays them on the display on the top of the system. The stand-alone system 100 can be connected to a network 110 as shown in Pflugrath et al., but this is for the purpose of sending the images to another location or department after the imaging system has produced them. The network is not needed to process the acquired signals to produce the images, as the system 100 has the hardware and software to do that. The network is not needed to display the images, for the imaging system has its own display. But with an implementation of the present invention, the clinician only has to bring a signal acquisition unit to the patient's room. The acquired signals are sent over the hospital network to a central data processor, where they are processed to form an image. The images are then sent back over the network for display such as on the monitor or display in the patient's room. Thus, the unit that the clinician carries around is very light and easy to carry, since the processor and display are networked and are not configured with the acquisition unit as part of the system until the clinician arrives in the patient's room.

Claim 22 has been amended to highlight the distributed aspects of the present invention, which are not found in Pflugrath et al. The display units are recited as being separable from the signal acquisition units. This is not the case in Pflugrath et al., where the display is an integral part of the ultrasound system 100. Amended Claim 22 also recites that one of the plurality of display units may be configured to be paired up with one of the plurality of diagnostic signal acquisition units, which is not the case in Pflugrath et al. In Pflugrath et al. the display and acquisition units of each system are fully integrated and not susceptible to change through any other configuring. In Pflugrath et al. each ultrasound system does its own signal processing. There is no networked data processor which processes the diagnostic signals from a plurality of acquisition units as recited in amended Claim 22. For all of these reasons it is respectfully submitted that amended Claim 22 is patentable over

Pflugrath et al. It is further submitted that Claims 23-29 are patentable by reason of their dependency on Claim 22.

In view of the foregoing amendment and remarks, it is respectfully submitted that Claims 22-29 are patentable over Pflugrath et al. Accordingly it is respectfully requested that the rejection of Claims 22-29 be withdrawn.

In light of the foregoing amendment and remarks, it is respectfully submitted that this application is now in condition for allowance. Favorable reconsideration is respectfully requested.

Respectfully submitted,

HELEN ROUTH ET AL.

By: /W. Brinton Yorks, Jr./
W. Brinton Yorks, Jr.
Reg. No. 28,923

Philips Electronics
22100 Bothell Everett Highway
P.O. Box 3003
Bothell, WA 98041-3003
(425) 487-7152
February 23, 2009